IRB Single Study Institutional Authorization Agreement (IAA) Form



(cede IRB oversight to another FWA institution)

| Tha | following | information | ie with | regard to | the institution | accumina | avareight |
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Name of institution assuming oversight

Institution's Signatory Official

IRB Name Institution's FWA # IRB Registration #

IRB Human Subjects Administrator IRB Chairperson FWA Expiration Date

The following information is with regard to the single study in question.

Project PI & Co-PIs

Project Name/Title or ID #

Project Time Frame (Mo/Yr to Mo/Yr)

Engaged institutions are those in which either employees or students are actively interacting with research subjects for research purposes, obtaining informed consent, accessing any private data associated with the research, or is funded under the study in question.

Please list all institutions which will be engaged in human subjects research under this study (including the institution assuming oversight and the institution ceding oversight).

In order to cede IRB oversight to another institution, Florida SouthWestern State College requires the following documentation from the PIs be attached to this form:

- 1. A copy of the study protocol that is to be submitted to the institution assuming IRB oversight.
- 2. A copy of the final approval letter or documentation from the IRB assuming oversight following review.
- 3. A copy of the proposed IAA from the institution assuming IRB oversight.
- 4. NIH or similar human protections research training of the FSW-affiliated PI or Co-PIs.
- 5. Provide a brief rationale below explaining why Florida SouthWestern State College is to cede oversight to the institution's activities on this study.

| Rationale for ceding oversight | |
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| Γhe officials signing below agree that Florida SouthWestern Sta assuming oversight and continuing oversight of its human subje | |
| By signing below, the Florida SouthWestern State College PI or 1. Comply with the determinations of the IRB assuming revie 2. Promptly report to the IRB assuming oversight any noncor approved protocol. | |
| Seek IRB approval from reviewing IRB prior to altering app Comply with all federal, state, and local regulations. Comply with all Florida SouthWestern State College institutions. | |
| 7. Return a signed and completed copy of this document alor State College Human Subjects Administrator. | |
| FSW Affiliated PI or Co-PI Signature: | Date: |
| Name of FSW affiliated PI or Co-PI in signature above | |
| | |
| Florida SouthWestern State College will cede IRB oversight to a | · · |
| The review performed by the IRB assuming oversight will meet t Florida SouthWestern State College's OHRP-approved FWA. B assuming oversight agrees to: | |
| Provide initial and continuous review in accordance with 4 Provide any and all documents to Florida SouthWestern S risk, any non-compliance and/or termination of IRB app Provide meeting minutes pertaining to this particular project | state College pertaining to unanticipated problems related to proval. ct to Florida SouthWestern State College. |
| 4. Comply with all federal, state, and local laws and regulatio This document must be kept on file by both parties and provided | |
| Signatory Official of the institution of the IRB assuming ove | |
| 3 | |
| Signatura | Date: |